

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	9/4/01
FORMALITY REVIEW	100	1019	09-26-01
RESPONSE FORMALITY REVIEW	MD	2911	11/08/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1 1	3 9
2 2	19 15
3 3	04 08
4 4	
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6 6	
7 7	
8 8	✓
9 9	0
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15 15	0
16 16	✓
17 17	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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